

CITY OF BOULDER PLANNING AND DEVELOPMENT SERVICES CENTER

Rental Housing Inspection & Licensing Program

1739 Broadway, Third Floor • P.O. Box 791, Boulder, Colorado 80306-0791 phone 303-441-1880 • fax 303-441-3241 • e-mail plandevelop@ci.boulder.co.us www.ci.boulder.co.us/pwplan

Change of information or Agent

(Rental licenses are not transferable to new rental property owners.

New owners must re-apply for a rental license)

PLEASE PRINT

Rental Property Address	Street Name	Apt/Unit #
PROPERTY OWNER:		
First Name	Middle Initial	Last Name
New Street Address or Post Office	Box Number	e-mail address
City	State	Zip Code
Home Telephone Number	Work Telephone Number	
LOCAL AGENT: A property owner who Boulder County to serve as the local agent		• • •
First Name	Middle Initial	Last Name
Street Address or Post Office Box	Number	e-mail address
City	State	Zip Code
Home Telephone Number	Work Teleph	none Number
Correspondence concerning this p	property should be sent to:	☐ Owner ☐ Agent
I, the Owner/Agent for the a information is correct.	above property, do here	by affirm that the above
Signature		Date
PROPERTY NUMBER:	(the property # is on the righ	nt side of the rental license)